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Abstract 123

TITLE: Survival of AIDS Patients According to Injecting Drug Use in a Cohort of Perto Rican AIDS Patients According to Injecting Drug Use in a Cohort of Puerto Rican AIDS Patients

AUTHORS: DM Fernández, MA Gómez, M. Velázquez, M. Mayor, O. Gómez & RF Hunter Retrovirus Research Center, Internal Medicine Department, Universidad Central del Caribe, Bayamon, Puerto Rico

OBJECTIVES: This paper aims to: (1) describe IDU's and non-IDU's according to age, gender, AIDS criteria and antiretroviral use; and (2) assess survival differences between IDU's and non-IDU's according to age, gender, AIDS diagnosis criteria and antiretroviral use.

METHODS: This study is a survival study of a longitudinal cohort. The sample was composed of 1124 AIDS patients with AIDS diagnosis of a cohort of HIV-infected adults who sought medical care at either the Immunology clinic of Bayamon or the Ramon Ruiz Arnau University Hospital between January of 1992 and December of 1998. The variables studied were: survival time of AIDS, intravenous drug use, age, gender, AIDS defining criteria (clinical or immunological (< 200 CD4 count and/or <14% CD4 count) and antiretroviral therapy (yes/no). AIDS patients reported low survival. The Kaplan-Meier procedure was used to analyzed the median survival. Statistical comparisons of the survival functions differences were performed using the Log Rank test.

RESULTS: Significant difference (p<0.05) was found on survival between IDU's and non-IDU's, where IDU's had lower survival than non-IDU's. Significant differences in the survival functions (IDU's vs. non-IDU's) were found among male patients, younger patients, patients with immunological criteria and antiretroviral use. The mean survival time among these variables was lower for IDU's than non-IDU's.

CONCLUSIONS: This study suggested than variables related with low survival among IDU's were male patients, younger patients, patients with immunological criteria for AIDS diagnosis and antiretroviral use. Clinical endeavors should take in consideration the variables related with IDU survival to develop health programs to enhance the quality of life and the survival of the AIDS patient. This study was sponsored by RCMI/NIH Grant Number G12RR03035 and CDC-ASD-AIDS Surviellance Section Grant Number U62/CCU206209.

PRESENTER CONTACT INFORMATION

Name: Universidad Central Del Caribe

Address: P.O. Box 60327

Bayamon, Puerto Rico 00960-6032

Telephone: (787) 787 8710 8722

Fax: (787) 787-8733